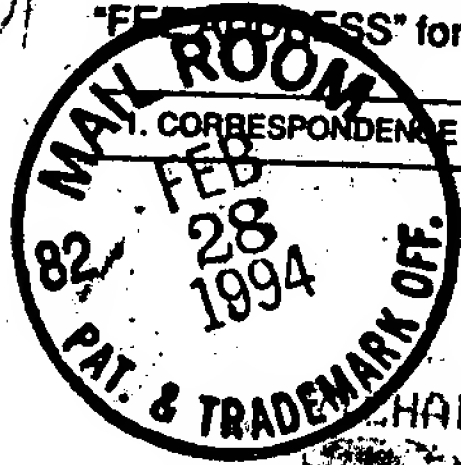


585-242 30-561 **PART B—ISSUE FEE TRANSMITTAL**

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advances orders and notification of maintenance fees will be mailed to addressee entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block below; or (b) providing the PTO with a separate "FEES ADDRESS" for maintenance fee notifications with the payment of Issue Fee or thereafter. See reverse for Certificate of Mailing.



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26M1/1129

2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)	
INVENTOR'S NAME	
Street Address	
City, State and ZIP Code	
CO-INVENTOR'S NAME	
Street Address	
City, State and ZIP Code	
<input type="checkbox"/> Check if additional changes are on reverse side	

SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
07/767,231	09/27/91	018	SHANRAN	11/29/93
First Named Applicant	MCGREGOR, DONALD S.			

TITLE OF INVENTION: CELLULAR PHONE ACCOUNTING SYSTEM

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
2 11557	370-059.000	588	UTILITY	YES	\$585.00	02/28/94

3. Correspondence address change (Complete only if there is a change)

4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

1. BIELEN, PETERSON & LAMPE

060 TH 03/04/94 07767231
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1 242 / 585.00 CK
1 561 / 30.00 CK

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

(1) NAME OF ASSIGNEE	Telemac Cellular Corporation
(2) ADDRESS: (CITY & STATE OR COUNTY)	515 Sycamore Valley Road West, Danville, CA Contra Costa County
(3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION	Delaware Corporation

6a. The following fees are enclosed:	
<input checked="" type="checkbox"/> Issue Fee	<input checked="" type="checkbox"/> Advanced Order - # of Copies 10 (Minimum of 10)
6b. The following fees should be changed to:	
DEPOSIT ACCOUNT NUMBER	02-2273
(ENCLOSED PART C)	
<input type="checkbox"/> Issue Fee	<input type="checkbox"/> Advanced Order - # of Copies
<input checked="" type="checkbox"/> Any Deficiencies in Enclosed Fees (Minimum of 10)	

A. ☐ This application is NOT assigned.
☐ Assignment is being previously submitted to the Patent and Trademark Office.
☒ Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.

PLEASE NOTE: Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the Application identified above.

(Signature of party in interest of record) *Richard E. Biele* (Date) 2/22/94

NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

TRANSMIT THIS FORM WITH FEE-CERTIFICATE OF MAILING ON REVERSE